



Improving the service system for people with intellectual and developmental disabilities through quality, person-centered, and family-focused supports that promote self-determination

Updates on HCBS I/DD Waiver and Legislative Initiatives

The purpose of this newsletter is to provide you with updates to the Developmental Disabilities Division's (DDD) initiatives. As you know, DDD is making changes to improve its program to comply with new federal requirements and to meet the evolving expectations of persons with disabilities. Collectively, the changes are called Possibilities Now! – and are designed to support people with disabilities to have a full life in the community.

Legislature Supports DDD's Budget Request!

The Executive Budget request, approved by the Legislature, allocated an additional \$7.7 million for FY2020, and \$5.8 million for FY2021 for the Medicaid I/DD Waiver. The Centers for Medicare and Medicaid (CMS) Final Rule on Community Integration is a major change impacting the I/DD Waiver. Published in January 2014¹ the goal of the Final Rule is to ensure that individuals receiving Home and Community Based Services (HCBS) have full access to the benefits of community living and the opportunity to receive services in the most integrated setting appropriate. Further, federal law for HCBS waivers requires that provider payment rates must be consistent with efficiency, economy, and quality of care, and be sufficient to enlist enough providers². DDD thanks the many providers who submitted testimony during the session to support DDD's initiatives. Your voice made all the difference!

Fiscal Year	Increase from Prior Year (State Funds*)	Funded
FY 2018	\$2.8 million	Yes
FY 2019	\$4.4 million	Yes
FY 2020	\$7.7 million	Yes
FY 2021	\$5.8 million	Yes

Table 1 - these amounts reflect only state funds. For every \$1 that the State spends, the federal government will contribute about \$1.13.

5 Factors Impacting I/DD Waiver Costs



1. **Adoption of the Supports Intensity Scale (SIS)** to ensure consistent and objective assessments so that participants are treated equitably and providers are paid fairly.
2. **Enhancing case management practices** including the adoption of the LifeCourse framework, which was “created by families to help individuals and families of all abilities and all ages develop a vision for a good life, think about what they need to know and do, identify how to find or develop supports, and discover what it takes to live the lives they want to live.”
3. **Provider payment rates** based on a rate study that meets federal requirements. Notable changes to the payment structure include the establishment of higher Big Island rates to account for higher travel expenses and tiered rates for certain

services to pay providers more for serving participants with greater needs who generally require more intensive staffing.

4. **Establishment of individual budgets** that assign a funding amount to participants based on their residential placement and assessed needs. This approach balances the need for financial accountability with person-centered practices as once the budget amount is determined, participants are empowered to make decisions about choosing the mix of services that meets their needs.

5. **Several new services were added to the reauthorized waiver including:**

- Community Learning Service (CLS) for both individual and group services provided in community settings rather than at home or a center. The rates are higher than home- and center-based services to pay for more intensive staffing, travel-related expenses, and program planning.
- Residential Habilitation (ResHab) was restored after its elimination several years ago for participants living in licensed and certified settings to compensate providers for the 24 hours of care they provide.
- Higher rates for services delivered by registered behavior technicians for participants who need specialized supports to address behavioral issues, consistent with recent legislation³.
- Discovery and Career Planning and Benefits Planning to better support participants who wish to seek employment

Bills, Acts, and Resolutions Passed by the 30th Legislature, 2019

Act 91 provides an exemption of the I/DD Waiver from the Home Care Licensing Statute

Act 91, Session Laws of Hawaii (SLH) 2019 (SB 1240), amends section 321-14.8, HRS, to provide an exemption for agencies serving HCBS I/DD waiver participants. Without an exemption, Medicaid I/DD waiver agencies that provide personal care, homemaker assistance, and respite care would be required to obtain a home care license. Therefore, the Administration sought an exclusion for agencies that are approved by Department of Human Services, Med-QUEST Division (DHS-MQD) to serve HCBS I/DD waiver participants, which was supported by the Legislature.

Act 165 establishes the DDD Special Fund

“DDD will be able to use the fund for specific purposes...including training for staff and providers.”

Act 165, SLH 2019 (HB 1273) establishes the Medicaid Waiver Administrative Claiming Special Fund to Administer the Medicaid Home and Community Based Services (HCBS) Waiver for Individuals with Intellectual and Developmental Disabilities. This special fund will allow DDD to obtain additional federal funds through Medicaid administrative claims and to use the funding for the specific purposes listed in Act 165, including training for DDD staff and providers.

SCR 120 establishes a working group to coordinate services for people with I/DD and their families

Senate Concurrent Resolution 120 asks the State Council on Developmental Disabilities to convene a working group to identify strategies and agreements to better coordinate services provided to individuals with I/DD and their families. The working group is to provide recommendations on how to improve the coordination and provision of services and the application process for individuals with I/DD.

“The working group is to provide recommendations on how to improve the coordination...of services”

INSPIRE

Go Live

DDD successfully deployed its second release for INSPIRE, DDD's new IT Case Management System, in June. The release included a LifeCourse module, new ISP features, the Calculator 3.0 Individual Supports Budget planning tool and service authorizations. Go Live was preceded by multiple weeks of training for DDD staff. In addition, staff on all islands received support both in-person and online.

"DDD successfully deployed its second release for INSPIRE in June"

Next Steps for INSPIRE

Two more releases are planned for INSPIRE. They will include more robust reporting, interfaces with the Med-QUEST system and certain electronic medical record systems and portals for DDD providers and customers.

Provider Portal

The Provider Portal will enable DDD providers to access the ISP and service authorizations, submit standardized IPs and Quarterly reports, and receive referrals. Providers will be able to maintain vacancy listings for services and will also be able to electronically submit Adverse Event Reports to DDD. Training will be conducted by the Community Resources Branch and DDD IT staff. There will be help desk support available to all providers.

MQD Electronic Visit Verification (EVV) – Update #2

EVV Overview

The federal 21st Century Cures Act passed by Congress in December 2016 requires states to implement EVV for certain home and community-based services: Personal Care Services (PCS) by January 1, 2020, and Home Health Care Services (HHCS) by January 1, 2023. Hawaii will be implementing both PCS and HHCS at the same time.

The EVV system must electronically verify the following:

Type of service performed	Individual receiving the services	Date of service	Location of service delivery at beginning and ending of service	Individual providing the service	Time the service begins and ends
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The "Open Vendor" was selected as the EVV system model. The Open Vendor model utilizes a single EVV vendor but allows HHCS/PCS providers, QUEST Integration-Managed Care Organizations (QI-MCO), and DDD to use other EVV vendors at their own cost if they choose. Stakeholders choosing to use an alternate system will incur any and all related costs, including costs related to system requirements necessary to transmit data to the statewide EVV vendor data aggregator.

Statewide EVV vendor (Sandata) approved by CMS

CMS reviewed and approved the EVV vendor, *Sandata*, in mid-May.

Mandatory EVV Training

Mandatory EVV training is projected to start in Fall 2019. The following will be required by MQD to take EVV training:

- QI-MCO, DDD, and MQD staff whose duties include HHCS and PCS
- Personal Care and Home Health Providers

"Training is projected to start in Fall 2019...more training details will be provided in August"

- Medicaid beneficiaries receiving HHCS and PCS services, including Self-Directed/Consumer-Directed beneficiaries

Training will be provided by *Sandata*. MQD anticipates that training will be delivered in several modes including face-to-face, webinar, and self-paced learning. More training details will be provided in August 2019.

EVV Resources

Additional MQD EVV information can be found here: www.medquest.hawaii.gov/EVV

The EVV project manager can be contacted at dforsell@dhs.hawaii.gov. Post implementation of EVV, the mailbox EVV-MQD@dhs.hawaii.gov will continue to be available for all EVV related questions.

Waiver 2021 Planning

The Medicaid I/DD Waiver renewal is slated for the Summer of 2021! To start off the planning, workgroups are being scheduled for August and October to begin discussing any changes or new areas for the waiver. Each workgroup will have a “charter” that will help us make the meeting times focused and productive. We have identified the following workgroups (with more to come): ResHab, Nurse Delegation, Community Learning Service, Behavior Analytic Services, Employment, and Adult Day Health service delivery for transition aged youth/young adults. We will be reaching out to invite providers and stakeholders to participate in the near future.

For more information, please email doh.dddcrb@doh.hawaii.gov

¹ Medicaid Program; State Plan Home and Community-Based Services, 5-Year Period for Waivers, Provider Payment Reassignment, and Home and Community-Based Setting Requirements for Community First Choice and Home and Community-Based Services (HCBS) Waivers (79 Fed. Reg. 2947 (Jan. 16, 2014)).

² 42 U.S.C. 1396a(a)(30)(A).

³ HRS Chapter 465D (Act 199 Sessions Laws of Hawaii 2015).